



King County

Mental Health, Chemical Abuse and Dependency Services Division

Department of
Community and Human Services

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King County Mental Health Advisory Board (MHAB) Regular Meeting April 14, 2015

Members Present: Nancy Dow, Alicia Glenwell, John Holecek, Kristin Houser, Toni Krupski, Katelyn Morgaine, Kathy Obermeyer, Heather Spielvogel

Members Absent: Lauren Davis, Veronica Kavanagh, Allan Panitch (excused)

Guests Present: Daniel Nelson, Kristina Sawyckyj-Moreland, (Board Candidates); Susan McLaughlin, Department of Community and Human Services, (DCHS); Susan O'Patka (Guest); Joan Clement, King County Alcoholism and Substance Abuse Administrative Board, (KCASAAB); Suzie Hill (MH Ombuds)

Mental Health, Chemical Abuse and Dependency Services Division (MHCADSD)
Staff Present: Bryan Baird, Jean Robertson

I. Welcome and Introductions

Kristin Houser, Chair, convened the meeting at 4:35 p.m., in the Chinook Building, 401 5th Avenue, Seattle, Conference Room 126. Members were welcomed and introductions were made by each member. A quorum was present for the meeting.

II. Minutes Approval

The approval of the February 10 and March 24 regular meeting minutes were tabled.

III. Joint Board Planning Discussion – Susan McLaughlin

Members discussed and contributed the following list of principles, functions, and strengths to be carried over to the new, integrated Behavioral Health Advisory Board (BHAB) in April 2016. The new BHAB will be the product of the fully integrated MHAB and KCASAAB.

Discussion comments:

- For expertise purposes, have one mental health (MH) co-chair and one substance use disorder (SUD) co-chair positions written into the bylaws.
- With the three groups we serve (MH, SUD, Co-occurring), have as needed focus groups/subcommittees for each, how they interact with each other, and will be responsible to report to the full Board.
- A subcommittee for children/adolescents and families, especially with the move from Wraparound to Wraparound with Intensive Services (WiSe).
- The current liaison system is not working. Having an ongoing prioritization of communication with provider agencies; be thoughtful of how this communication can be done well, be sustainable, and be valuable.
- Important to have agencies come and talk about what is and is not working, their challenges, gaps in the system, etc.
- Board members as liaisons to agency board meetings, provider meetings.
- Agencies come to Board meetings with agency presentations.
- Strengthen ways consumer voices are involved with the Board; find other ways in addition to 51% membership.
- Connection to Voices of Recovery.
- Broad knowledge of recovery imperative.
- Consumer presentations.
- 25% recovery from each Board.
- Quality measures: how do we know what is working.
- Defining and measuring outcomes.
- Tracking accountability—never more important than now. How is it tracked? Who is tracking? What happens if outcomes are not met?
- Accountability—ensure systems are effectively working and delivering quality services to consumers.
- Data review and action.
- Housing—where fits in discussions and functions of the Board. Clean and sober housing—continuum of housing options allowing people to move.
- Recovery is a constant theme.
- Criminal Justice system.
- Link to Familiar Faces.
- Continue the Legislative Advocacy & Public Affairs Committee.
- Active law enforcement represented on the Board.
- Continue County staff support.
- As a role/function of the Board, have agencies and plans attend Board meetings to ensure their accountability and to monitor delivery of behavioral health services to consumers.

A draft contract for the early adopter region(s) is available at the link below. This draft is open for public comment, also found at the link below. Feedback is due Friday, April 24.

<http://www.kingcounty.gov/healthservices/MHSA/BehavioralHealthIntegration.aspx>

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IV. Chairperson's Report

No report.

V. Committee Reports

The Legislative Advocacy & Public Affairs Committee

No report.

Membership Committee

No report.

VI. Staff Report – Jean Robertson

Jean briefly spoke to the following points:

- Regional Support Network (RSN) and Apple Health (the five managed care organizations: Molina Healthcare, United Healthcare, Coordinated Care, Amerigroup, and Community Health Plan of Washington), program differences explained. On March 31, 2016, RSNs will end and become Behavioral Health Organizations (BHOs) on April 1, 2016. King County will serve as a single BHO and will not be an early adopter of full integration as the timeline was too aggressive for King County to assure services to clients would be well addressed. The state will release a framework for the detailed plan on July 1, 2015. Responses will be due by October 31.
- BHO planning in full swing with internal meetings; putting together a benefit package for MH, SUD, and Co-occurring; case rate determination; working with a consultant and financial groups, etc.
- Bills in Legislature:
 - SB1713, the Ricky Garcia Act was substantively changed at the 11th hour due to lack of funding. This bill was in regards to integrating the crisis and ITA systems for mental health and chemical dependency. The bulk of the bill is now the administrative “clean up” for behavioral health integration.
 - SB1448, Sheena and Chris Henderson’s Law, procedures for police officers to respond to reports of suicide threats or attempts and timeline requirements for DMHPS to respond.
 - SB1450, Involuntary MH Outpatient Treatment, amends into the existing law the ability to go directly to a lesser restrictive alternative order without having to be hospitalized. This Bill is making progress and may pass.
 - EHB 1258 / E2SSB 5269 “Joel’s Law” has passed both houses. This bill would allow immediate family members to petition the court to review a DHMP’s decision not to detain a person under the Involuntary Treatment Act (ITA). The language of this Bill is not yet finalized.

VII. Other Business

Joan Clement announced the initiative to raise the tobacco purchase law has been raised to age 19. More information to come.

VIII. Board and Community Concerns

No report.

IX. Adjournment:

With no further business, the meeting adjourned at 6:22 p.m.

Prepared by:

Bryan Baird, Board Liaison

Attested by:

Kristin Houser, Chair

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